


PTO/SB/22 (06-04)

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | Docket Number (Optional) 60590 (50531) | |
| Application Number 09/581,781 conf # 4332 | | Filed June 17, 2000 | |
| For Low Environmental Toxicity Latex Coatings and Their Use in Ink and Paint Applications | | | |
| Art Unit 1614 | | Examiner Dwayne C. Jones | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| | Fee | Small Entity Fee | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110.00 | \$55.00 | \$ |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$420.00 | \$210.00 | \$ 210.00 |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$950.00 | \$475.00 | \$ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1,480.00 | \$740.00 | \$ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2,010.00 | \$1,005.00 | \$ |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1105</u> . I have enclosed a duplicate copy of this sheet. | | | |
| I am the <input type="checkbox"/> applicant/inventor. | | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98). | | | |
| <input type="checkbox"/> attorney or agent of record. Registration Number _____ | | | |
| <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>40,024</u> | | | |
|  Signature | | Date _____ | |
| Typed or printed name <u>Jeffrey D. Hsi</u> | | Telephone Number <u>(617) 439-4444</u> | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | | |

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below.

Dated: November 10, 2004 Signature: 

(Mona T. Reen)